

**MARICOPA COUNTY
AIR QUALITY
DEPARTMENT**

**Emissions Inventory Unit
(602) 506-6790
(602) 506-6179 (FAX)
(602) 506-6704 (TDD)**

2007 Annual Emissions Inventory

Business Form

Due Date: _____

Permit Number _____

1- Owner Name: _____

2- Business Name: _____

3- Business Street Address (Physical Location): _____

4- City: _____ 5- ZIP Code: _____

6- Number of Employees _____ 7- Property Size: _____ acres
at this location:

8- SIC Code: _____ Primary: _____ Secondary: _____

9- NAICS Code: _____ Primary: _____ Secondary: _____

10- Preparer of the Inventory (primary contact for technical questions concerning this report):

Name: _____

Title: _____

Employer: _____

Telephone: () _____ Fax: () _____

E-mail address of preparer: _____

11- Who should receive the Annual Emissions Inventory Form next year?:

Name: _____

Title: _____

Employer: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: () _____ Fax: () _____

Return the original copy of all completed forms to:
**MCAQD One Stop Shop
Emissions Inventory Intake
501 N. 44th Street, Suite 200
Phoenix AZ 85008-6538**

For more information, contact the Maricopa County Emissions Inventory Unit at (602) 506-6790.

Detailed instructions, sample forms and reference materials are available at:

http://www.maricopa.gov/aq/divisions/planning_analysis/emissions_inventory/Default.aspx